

Anasarca

Thomas P. Rives

admitted March 24. 1919

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qualifications, but also affected with  
a sense of your holding towards me  
the advantage which I am now  
your instruction, the following  
"Inaugural Lecture" is very  
respectfully and gratefully to you.

By your

Thomas P. Rives

The author

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To Robert P. Downman M.D

Influenced, Sir, not only by  
a consideration of your high medical  
qualifications, but also affected with  
a sense of your politeness towards me,  
& the advantage which I derived from  
your instructions, the following  
Inaugural Dissertation is very  
respectfully dedicated to you,  
by your.  
Friend & Pupil  
The Author.

To Oliver & Brown

My dear Sir,  
I have the honor to acknowledge the receipt of your letter of the 11th inst. in relation to the proposed subscription for the purchase of a new edition of the Bible for the poor of the city of New York. I am very glad to hear that you are so interested in this cause, and I am sure that your efforts will be successful. I have already received several contributions, and I am confident that many more will be forthcoming. I am, Sir, very respectfully,  
Your obedient servant,  
The Editor.

Oliver & Brown  
The Editor.



On Anasarca  
An Inaugural

Dissertation

On Anasarca

Dr. J. C. W. may be defined the protrusion  
of a serum or watery fluid in  
some parts of the body &c.

In a healthy state of the system  
there is always a considerable quantity of  
fluid therein into every cavity of the body  
which is taken up by the lymphatics  
In a large majority of cases, anasarca is the  
result of an increased secretion of the  
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In a pathological point of view

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## On Anasarca.

Previous to the immediate consideration of the subject which I have selected, I will make a few remarks, on the nature of dropsy generally.

Dropsy may be defined a premature collection of a serous or watery fluid, in some part of the body.

In a healthy state of the system, there is always a considerable quantity of fluid thrown into every cavity of the body, which is taken up, by the Lymphatics.

In a large majority of cases, dropsy is the result of an increased exhalation of this fluid. —

In a pathological point of view,

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Dr. Rush

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we may distinguish it into Tonic & Atonic.

Perusing the works of European writers, we will find, that most of them consider it as a disease originating in debility. But that it is also frequently associated with an excited and febrile state of the system, is a fact which was first clearly established in this country, by the late distinguished Dr. Rush.

Dr. Blackall considers the urine as a criterion, whereby we may discriminate between the two species of Dropsy. In the Tonic, he says, the urine is scanty, high coloured, deposits no sediment, and coagulates by heat and the Nitric acid. In the Atonic, it is pale, scanty &c, but does not coagulate as the former. But I consider the pulse (the grand Index of the system) a

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Test far superior to any of this descriptions.

Anasarca first discovers itself, by a swelling of the feet and ankles, appearing in <sup>evening</sup> the ~~day~~ disappearing for a time in the morning; the tumefaction is soft & inelastic, indentations being readily formed by pressure. Gradually the swelling ascends, occupying the abdomen, or extending higher up, so as to constitute an universal Anasarca. There is now difficult & uneasy respiration, the cellular membrane of the lungs, being also affected, the bowels are constipated, the urine scanty, the surface dry, accompanied with more or less febrile action.

As the disease advances, there is much torpor & distension, and ultimately the patient sinks, by debility.

The causes of Anasarca are the same as those of dropsy generally, to wit,

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preceding diseases, as the Intermittent Fever,  
Podagra, Dysentery, Diarrhoea, Phthisis,  
Escarthematic affections, as Scarcemia and  
Pyripelas, Visceral affections. Sometimes dropsy  
is the consequence of debility, when we may  
suppose the absorbent apparatus to be deficient  
in action. Thence drinking is also a frequent  
cause.

In the cure of Anasarca we  
form two general indications, 1<sup>st</sup> To evacuate  
the water collected & 2<sup>nd</sup> To prevent a  
reaccumulation.

I have before remarked, that there  
were two forms of dropsy, namely the Tonic  
& Atonic. I shall first treat of the remedies  
proper for the Tonic form, or that attended  
with an excited state of the system.—

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Where the means usually resorted to for depleting and reducing the system become necessary. —

Venesection. The pulse being full and active, accompanied also with other marks of a phlogistic diathesis, we cannot hesitate as to the propriety of the remedy. In the use of bloodletting, we must be regulated by the state of the system, and the degree of arterial excitement. In some cases, pretty copious & repeated bleeding is requisite; in other cases only moderate bleeding.

Cathartics. These constitute a very important class of medicine, in the treatment of dropsy. They operate by diminishing inflammatory action, & invigorating the powers of absorption. Formerly it was customary to give the most drastic. With

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much more benefit, can we resort to the  
Saline & Tartrate preparations. The  
Super-tartrate of Potash & Salap in combination,  
are the most important articles of this class.  
Their effects are sometimes, exceedingly prompt;  
& they have often dispersed dropsical  
swellings, without the aid of any other  
remedy.

Diuretics. At the head of this list,  
the bromor tartar, indisputably stands. At  
present it meets with the concurrent approbation  
of physicians. It was originally introduced  
to public notice, by Dr. Home of Edinburgh.  
It frequently acts by a combined operation  
on the Kidney, & bowels. When we wish  
to augment its diuretic power, we should  
give at the same time a considerable  
quantity of water. It is now generally admitted,  
although hitherto a subject of dispute,

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among physicians, that it is unnecessary to  
restrain patients in the use of water. The  
diuretic effect, <sup>of menses</sup> are thereby certainly very much  
increased.

*Scilla Maritima*. This is an invaluable  
diuretic in every variety of dropsy. It must  
be recollected, however, that it is stimulant  
in its operation, & hence improper, when the  
disease is accompanied with febrile action. It  
is highly improved by a combination with  
Calomel. With respect to the dose, it should  
be given so as to excite a moderate degree  
of nausea.

Particularly adapted to febrile cases  
is the *Nitras Potassæ*. The continued use  
of this medicine has the effect of impairing  
the digestive organs; & hence when it has  
been employed sufficiently long to hurt it,





efficacy, without producing satisfactory results, it should be discontinued, & as a substitute, we may use the Spt. Atheris Nitroni, which in order to be of any efficacy must be liberally employed, as in the dose of, iij or ʒiv.

Fixed Alkalies— are also recommended as pretty good diuretics; of which the Potassa seems preferable.

Some of the Alliacea are occasionally employed as diuretics.

*Spicum Petroselinum*. This though a domestic remedy, is yet an active diuretic. Every part of the plant possesses this property, but the root in decoction is preferable.—

Diaphoretics have sometimes been productive

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of very beneficial effect. When these measures have been unavailingly used, they are well worthy of a trial.

Mercury. In southern climates, dropsy is very frequently associated, with visceral affections, & in those cases, mercury becomes indispensably necessary. It should be used to the extent of a moderate salivation.

In closing this part of my subject, I might here enumerate, Abstinence, low diet, hard labour, fear, & other causes, of evidently of a debilitating nature, which have occasionally done good, in this species of dropsy. Several success, are related by Dr. Rush.

I proceed secondly to consider the other forms, in which anasarca appears,

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namely, the Atonic.

The remedy here, should be such Stimulant substances as are calculated to excite general vigor, or determine the fluids, to the urinary organs.

**Tonics.** The best tonic medicines are the Peruvian Bark, vegetable Bitters & Chalybeats. The diet should be nutritive & Exercise particularly enjoined, proportioned to the strength of the patient. It should be of the active kind, such as moderate walking & riding on horseback.

**Diuretics.** The first of the Stimulant diuretics which I shall name, is the *Polygala Senega*. Being tonic and actively diuretic, it is well adapted to those cases attended with an enfeebled

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The *Pipola Umbellata*, known also by the name of *Piprisocera*, has been lately introduced as a remedy for dropsy, & is represented to have been beneficial. Being analogous to the preceding article, it is well worthy of a farther trial.

The *Sinectise* of *Cantharides* is a very active diuretic in those cases, & should be liberally employed, as its irritating effects are thereby prevented.

*Eupatorium Persoliatum.*

Being tonic & diaphoretic, it appears well adapted to those cases, originating in miasmatic vitiation.

*Digitalis Purpurea.* It would seem

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a priori, from the well known operation  
of digitalis, that it ought to be located  
with those remedies, for the preceding form  
of Anasarca, but experience has proven  
its inutility. It was originally introduced  
by the celebrated Dr. Withering, with  
high commendations. Various, & diversified  
have been the reports, with regard to its  
efficacy. Dr. Ferris relates a great  
many cases, in which comparative trials  
were made with the digitalis & the  
Spermaceti Potassa, from which it appears  
that the latter medicine was, very  
far superior. Nevertheless abundant  
testimony could be adduced of its power,  
in almost every species of dropsy; and we  
may suppose that the diversified accounts  
have originated from the administration  
of the medicine, in different states of the  
system. Dr. Chapman is of opinion

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that it is in atonic cases, that the medicine decidedly displays its best powers. We

should be cautious not to proceed too far with the medicine, unless its mode of operation be evident, as it possesses the peculiarity of remaining dormant for some time, & of suddenly developing its full effects. —

I come ~~lastly~~ now to consider the local treatment of Anasarca, having detailed the most important general remedies.

When the extremities are much distended with water, which is accompanied with considerable uneasiness, much relief may be obtained, by evacuating it. This should be effected by making small punctures with a lancet, which should not be too deep, as

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Erysipelatos, inflammation & gangrene might otherwise result. These affections sometimes occur in cellular dropsy, especially in the extremities.

Either from the extreme distension produced by the effused fluid, or from the topical action of the capillary vessels, the vitality of the integuments, is occasionally so much impaired, as to cause gangrene or mortification—

Under such circumstances, blisters which are so beneficial to arrest the progress of mortification, preceded by inflammation, (and which I would observe were introduced by Dr. Physic) are totally inadmissible: indeed they sometimes occasion the very mischief in question.

The practice recommended by

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Dr. Chapman, is to compress the extremity both above & below <sup>the part affected</sup> with a flannel roller tightly applied. This operates on a principle easily applicable; namely by imparting tone & warmth to the encased ~~limb~~ <sup>limb</sup> whereby it is enabled to resist the farther extension of the putrefactive process. This method of treatment, I believe, originated with Dr. Chapman.

It only remains now, for me to describe the method of fulfilling the second general indication of cure, to wit, to prevent the reaccumulation of water.

When the case, is in some degree local, frictions & the laced stocking are of considerable service, in preventing the reproduction of water.—

The first thing I should mention is the  
 fact that the patient is a female  
 aged 35 years. She has been suffering  
 from a chronic condition for several  
 years. The symptoms are quite  
 persistent and have not responded  
 to the usual treatment. I have  
 been consulting with the other  
 members of the staff and we have  
 decided to try a new approach.  
 The patient is very cooperative  
 and follows instructions carefully.  
 We will be monitoring her progress  
 closely and adjusting the treatment  
 as needed. I hope this will lead  
 to a successful outcome.

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With respect to the general remedies, we should resort to Tonics, the best of which are the Cinchona & Chalybeates.

Should tonics not prove effectual, but on the contrary should there <sup>be</sup> a strong predisposition to an accumulation of water, we must endeavor to change the state of the system, by introducing mercury gradually, as an alterative. If the patient should be incapable of bearing the operation of this medicine, the Nitric Acid may be advantageously substituted.

The diet should be nutritive, and Exercise particularly enforced. The latter has of itself frequently effected a cure of the Dropsy.

Finis.

